

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	R	92	CC/120161
<b>RESPONSE FORMALITY REVIEW</b>	jlh	1030	G-1501

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/15/62
2			
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4		✓	
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50		✓	

Claim	Final	Original	Date
51	✓		
52	✓		
53	N		
54	N		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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